

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

Martin Carlson, Acting USA  
P.O.Box 11754  
Harrisburg, Pa.17108

## 2. Article Number (Copy from service label)

7000 0520 00230166 3142

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

## COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

AUG 08 2001

C. Signature

X *Em. Proctor*☐ Agent☒ AddresseeD. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

## 3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

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## 1. Article Addressed to:

Jake Mendez, Warden  
Max. Security Correct. Inst.  
P.O.Box 3000  
White Deer, Pa.17887

## 2. Article Number (Copy from service label)

7000 0520 0166 3128

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

## COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

J. Mendez

8-7-01

C. Signature

X *J. Mendez*☐ Agent☒ AddresseeD. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

## 3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

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## 1. Article Addressed to:

John Ashcroft, Attorney General  
U. S. Department of Justice  
P.O.Box 878, Ben Franklin Station  
Washington D. C. 20044

## 2. Article Number (Copy from service label)

7000 0520 0166 3128

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

## COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

S. Lawrence

8-9-01

C. Signature

X *S. Lawrence*☐ Agent☒ AddresseeD. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

## 3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☐ YesFILED  
HARRISBU

AUG 14 2001

MARY E. D'ANDREA

Per *SJS*  
DEPUTY CL1-CV-01-1  
Show Can  
Order

8-6-01